| | • | | 1 | Whaternovi A | | | |
|--|----------------------------------|--|---------------|----------------------------|--|---|------------------------|
| PATENT APPLICATIO | N FEE DETER! ive October 1, 2 | MINATION RECO | RD · | 09/8 | <u> 8 </u> | 062 | 0 |
| CLAIMS A | (Column 1) | (Column 2) | SMALL TYPE | ENTITY | OR | OTHER SMALL E | NTITY |
| TOTAL CLAIMS | | | RATE | | ۲ | RATE | FEE |
| FOR | NUMBER FILED | NUMBER EXTRA | BASIC | EE -056.00 | OR | | 710.00 |
| TOTAL CHARGEABLE CLAIMS | 155minus 20= | 135 | X\$ 9 | - 1215 | OR | X\$18= | |
| INDEPENDENT CLAIMS | 8 minus 3 = | 5 | X40- | - 200 | OR | X80= · | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | +135 | 135 | OR | +270= | | |
| If the difference in column 1 is less than zero, enter "0" in column 2 | | TOTA | 1 1600 | QЯ | TOTAL | | |
| BIN OF CLAIMS AS | AMENDED - PA | IRT II lumn 2) (Column 3 | SMA | LL ENTITY | OR | OTHER SMALL | NTITY |
| CLAIMS REMAINING | HI NI PRE | GHEST UMBER EVIOUSLY AND FOR | .RAT | ADDI- E TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| AFTER AMENDMENT | Minus •• / | 55 · Ø | XS |)= <u> </u> | OR | X\$18= | |
| Independent • 3 | Minus ••• | 8 - 8 | X40 | 1 | OR | X80= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | +135 | | OR | +270= | | |
| \/ | | | | TAL. | ОЯ | YOTAL ADDIT, FEE | |
| 100 | (Cr | olumn 2) (Column 3 | ADOIT. | PEE | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| CLAIMS CLAIMS REMAINING AFTER AMENDMENT | H N PRI | IGHEST IUMBER EVIOUSLY EXTRA AID FOR | RAT | ADDI- TE TIONAL FIEE | | RATE | ADDI- TIONAL FEE |
| | Minus ••• | 155 - 0 | ХЗ |) | OR | X\$18= | mir i |
| independent • 3 | Minus ••• | 8 -0 | X40 | | OR | X80= | 7 |
| FIRST, PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | +13 | 5.0 | OR | +270= | · | |
| | , 4. | | | TAL 63 | OR | YOYAL ADDIT, FEE | |
| Column 1 (Column 1 | i c | olumn 2) (Column : | ADDIT. 3) | | . | | |
| CAIMS . CLAIMS | PR | HIGHEST NUMBER PRESENT JEVIOUSLY PAID FOR EXTRA | 7 | |] | PATE | ADDI- TIONA FEE |
| AFTER AMENDMEN Total | Minus | | XS | | OR | X\$18= | |
| 1134 ilination of the second o | · Minus ••• | | |)= | OR | X80= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | J +13 | 5 | OR | | • |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | STAL | OR | TOTAL | - |
| The Highest Number Previously The Highest Number Previously The Highest Number Previously | | | 20" | ere | | ADDIT. FEE | |
| The state of the s | | | | | | | |